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: Amendment

FROM: Gregory S. Smith

Examiner

: OSMAN, Ramy M.

Faxing DATE: January 18, 2005

FACSIMILE

: (703) 872-9306

LAVA GROUP FILE #: 05002.1040

SUBJECT: Application Serial No 09/834,376 Filed April 13, 2001

This Transmission Includes the Following Items

| | Item being transmitted | | Pages |
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| \boxtimes | Transmittal | • . | 1 |
| | Issue Fee Transmittal | Consider the Constitution of the Constitution | 2 |
| | PTO 2038 Credit Card Authorization | | 1 |
| \boxtimes | Request for Extension of Time | | 2 |
| \boxtimes | Response | | 23 |
| | | Total Pages Including Cover Sheet | 30 |
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COMMENTS:

Two Ravinia Drive, Suite 790 Atlanta, Georgia 30346 TELEPHONE: 770-804-9070 FACSIMILE: 770-804-0900

MOBILE: 404-643-3430 EMAIL: gsmith@lavagroup.net

DTO/DDM4 (00 04)

| TRANSMITTAL FORM Filing Date April 13, 2001 First Named Inventor RENSIN Devid K. TRAL FAX CENT Art Unit 2157 Examiner Name OSMAN, Ramy M. JAN 1 8 2005 Total Number of Pagus in This Submission 29 ENCLOSURES (Check all that apply) Fee Transmittal Form Peetition Peetition Drawing(s) After Final After Fin | Under the Pa | perwork Reduction Act of 199 | 5. no persor | nsame An | U.S required to respond to a c plication Number | 1 | formation | k Office; unless it | U.S. DEP displays | ARTMEN a valid Of | rofc /Bcon | OMMERCE trol number. |
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| Amendment/Reply Petition to Convert to a Provision to Convert to a Provisional Application Proprietary Information Proprietary Information Proprietary Information Status Letter Other Enclosure(s) (please Identify below): PTO-2038 Credit Card Authorization Form PTO-2 | ✓ F | ee Attached | | Licen | sing-related Papers | | | | | | | |
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| Affidavits/declaration(s) Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Contribution Cartified Copy of Priority Document(s) Reply to Missing Parts Incomplete Application Reply to Missing Parts Incomplete Application Reply to Missing Parts Signature Printed name Gregory Scott Smith Date January 18, 2005 CERTIFICATE OF TRANSMISSION/MAILING I hereby cartify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown bolow: Signature | | · - | | Petitio | on to Convert to a | | | | | | | - / |
| Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement CD, Number of CD(s) Cartified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts/ Under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name LAVA Group Lew by Smith & Frohwein, LLC Signature Printed name Gregory Scott Smith Date January 18, 2005 CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown bollow: Signature | │ | fter Final | | | | ion | | - | _ | Omeno | ı | |
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| Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts Under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name LAVA Group Lew by Smith & Frohwein, LLC Signature Printed name Gregory Scott Smith Date January 18, 2005 CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: Signature | Information | on Disclosure Statement | ΙШ. | CD, N | iumber of CD(s) | | 1 | | | | | |
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| Reply to Missing Parts/ Incomplete Application Reply to Missing Parts Under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name LAVA Group Lew by Smith & Frohwein, LLC Signature Printed name Gregory Scott Smith Date January 18, 2005 CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: | | | Rema | rks | | - | | | | | | |
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| Printed name Gregory Scott Smith Date January 18, 2005 CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: Signature | Firm Name | LAVA-Group Lew by Smi | th & Frohv | veln, l | .LC | | | | | | | *** |
| Gregory Scott Smith Date January 18, 2005 CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: Signature | Signature | , | | | | | | | | | | |
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| sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: Signature | | C | ERTIFIC | CATI | E OF TRANSMIS | SION/MA | ILING | | | | | |
| Signature | sufficient postage | as first class mail in an er | imile t | ransmitted to the USP ed to: Commissioner t | TO or depo for Patents, | sited wit P.O. Bo | h the Ur c 1450, | ited Sta Alexand | tes Post ria, VA 2 | al Serv 2313- | rice with 1450 on | |
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This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (12-04v2) Approved for use through 07/31/2006. OMB 0651-0032

Small Entity

Fee (\$)

100

65

80

0

Fee (\$)

50

200

360

300

Fee (\$)

200

130

160

600

Fees Paid (\$)

Small Entity

Fee (\$)

25 100

180

Multiple Dependent Claims

Telephone (770) 804-9070

Date January 18, 2005

Application Type

Utility.

Plant

Reissue

Provisional

Total Claims

SUBMITTED BY

Signature

Fee Description

2. EXCESS CLAIM FEES

Multiple dependent claims

Name (Print/Type) Gregory Scott Smith

Design

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Panerwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number Effective on 12/08/2004. Complete if Known Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 09/834,376 Application Number RANSM Filing Date April 13, 2001 For FY 2005 First Named Inventor RENSIN, David K. **Examiner Name** OSMAN, Ramy M. Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2157 TOTAL AMOUNT OF PAYMENT 1020.00 Attorney Docket No. 05002.1040 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None L Other (please identify): Deposit Account Deposit Account Number: Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES SEARCH FEES EXAMINATION FEES**

Small Entity

Fee (\$)

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| 20 or HP = | x | = | | | Fee (\$) | Fee Pald (\$) |
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| If the specification and listings under 37 C sheets or fraction to 10 Sheets 79 - 100 = | I drawings excee FR 1.52(e)), the hereof. See 35 U Extra Sheets | application signs. S.C. 41(a)(1) | ze fee due is \$2)(G) and 37 CF of each addition | 250 (\$125 for small e | ntity) for ea <u>Fee (</u> \$ | ach additional 50 |
| . OTHER FEE(S) Non-English Specifi | cation, \$130 fe | e (no small e | ntity discount) | | | Fees Paid (\$) |
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Fee Paid (\$)

Small Entity

Fee (\$)

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Fee (\$)

Fee (\$)

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200

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200

Each independent claim over 3 (including Reissues)

Extra Claims

Each claim over 20 (including Reissues)

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the Inis collection or information is required by 37 GFR 1.135. The information is required to obtain or retain a benefit by the public which is to tile (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 GFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Tredemark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Registration No. 40,819

(Attorney/Agent)

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PTO/SB/17 (12-04v2)
Approved for use through 07/31/2006. OMB 0651-0032

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| Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). | | | | | Complete if Kn | own | 7 | | | |
| | Application Nu | ımber | 09/834,376 | | | | | | | |
| | | SMITTAL | Filing Date | | April 13, 2001 | | 1. | | | |
| · F | or FY 2 | 005 | First Named In | rventor | RENSIN, David | K. |] | | | |
| Anoticant claims | mall entity status | See 37 CFR 1 27 | Examiner Nam | ne | OSMAN, Ramy | SMAN, Ramy M. | | | | |
| | Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2157 | | | | | | | | | |
| TOTAL AMOUNT OF | PAYMENT (\$ |) 1020.00 | Attorney Dock | et No. | 05002.1040 | | <u>/</u> | | | |
| METHOD OF PAYN | IENT (check al | l that apply) | | | | | | | | |
| Check Cre | dit Card | Money Order No | one Other | (please ide | ntify): | | | | | |
| Deposit Accoun | 1 Deposit Accour | Number: | Deposit A | Account Na | me: | | | | | |
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| | | (s) or underpayments of t | fee(s) Cred | lit any ove | erpayments | | | | | |
| WARNING: Information of | | scome public. Credit card is | nformation should : | not be incl | uded on this form. | Provide credit card | | | | |
| Information and authoriza | | | · · · · | | | | . | | | |
| FEE CALCULATION | ·· | CVARGINATION POSS | | | | | · · | | | |
| 1. BASIC FILING, S | EARCH, AND FILING | EXAMINATION FEES FEES SFA | RCH FEES | FYAM | IINATION FEES | . | | | | |
| Application Type | | mall Entity | Small Entity | | Small Entity | Fees Paid (\$) | | | | |
| Utility | 300 | Fee (\$) Fee (| | <u>Fee (</u> 200 | | rees raid (e) |] | | | |
| Design | 200 | 100 100 | | 130 | | | | | | |
| Plant | 200 | 100 300 | | 160 | | | | | | |
| Reissue | 300 | 150 500 | | 600 | | | | | | |
| Provisional | 200 | 100 0 | 0 | 0 | | | | | | |
| 2. EXCESS CLAIM Fee Description | FEES | | _ | | <u>Fee (\$)</u> | Small Entity Fee (\$) | | | | |
| Each claim over 2 | | | | | 50 | | | | | |
| Each independent Multiple dependent | | including Reissues) | | | 200 | 100 180 | | | | |
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| 3. APPLICATION SI | • | paid for, if greater than 3. | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | elmannad - than in mad a think the state of | | | | |
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| | | , the application size for | | | small entity) fo | r each additional 50 | | | | |
| sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) 79 - 100 = 0 / 50 = (round up to a whole number) x = 0 | | | | | | | | | | |
| 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) | | | | | | | | | | |
| 1 . | | : Three month Extension | • | | | 1020.00 | | | | |
| SUBMITTED BY | | | | | | |) | | | |
| Signature | 4 | | Registration No. | 0,819 | Teleph | ^{DDA} (770) 804-0070 | | | | |
| Name (Print/Type) Gregor | Scott Smith | | p man rape sparit | | Date Ja | anuary 18, 2005 | 1 | | | |
| | | R 1.136. The information is | required to obtain or | melain a be | neft by the nublic w | hich is to file (and by the | <u></u> | | | |

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